

## CLAIMS ONLY

Application Number

10-531670

Filing Date

1/18/05

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep.	Depend.	Indep.	Depend.	Indep.	Depend.
1	1					
2		1				
3						
4		1				
5						
6		1				
7						
8		1				
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46						
47						
48						
49						
50						
Total Indep	1					
Total Depend	7					
Total Claims	8					

May be used for additional claims or amendments

	Indep.	Depend.	Indep.	Depend.	Indep.	Depend.
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100						
Total Indep						
Total Depend						
Total Claims						